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Practitioner's Docket No. 1018.034US1

PATENT

TO 200 MAIL ROOM

DEC 20 1999

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Toyama

Application No.: 0 / 09/404,940

Group No.: 2775

Filed: 09/23/99

Examiner:

For:

Computerized Aesthetic Judgment of Images

Assistant Commissioner for Patents

Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

2. There is an error with respect to the following data, which is:

☒ incorrectly entered

and/or

☐ omitted.

Error in

1. ☐ Applicant's name
2. ☐ Applicant's address
3. ☐ Title
4. ☐ Filing Date
5. ☐ Application Number
6. ☐ Foreign/PCT Application Re:
7. ☒ Other

Correct data

- 1.
- 2.
- 3.
- 4.
5. The attorney docket number was entered incorrectly. It
6. should have a 1 at the end instead of an I to read:
7. 1018.034US1.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

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☒ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

FACSIMILE

☐ transmitted by facsimile to the Patent and Trademark Office.

Date: 10/26/99

Signature

Michael A. Dryja

(type or print name of person certifying)

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TC 2700 MAIL ROOM

3. (complete the following applicable item)

A. ☒ The correction(s) is/are not due to any error by applicant and no fee is due.

OR

B. ☐ At least one of the above corrections is due to applicant's error and the fee therefor, under 37 C.F.R. § 1.19(h), of \$25.00 is paid as follows:

☐ Enclosed is check for \$25.00.

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\_\_\_\_\_  
SIGNATURE OF PRACTITIONER

Reg. No.: 39662

Michael A. Dryja  
\_\_\_\_\_  
(type or print name of practitioner)

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704 228th Ave. NE PMB 694  
\_\_\_\_\_  
P.O. Address

Customer No.:

Redmond, WA 98053  
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FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/404,940	09/23/99	2775	\$1,156.00	1018.034USX	4	29	6

MICHAEL A DRYJA  
LAW OFFICES OF MICHAEL DRYJA  
704 228TH AVENUE NE  
PMB 694  
REDMOND WA 98053



Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) KENTARO TOYAMA, REDMOND, WA.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/18/99

TITLE

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PRELIMINARY CLASS: 345

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OCT 23 1999

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DATA ENTRY BY: COUPLIN, JACKIE

TEAM: 01 DATE: 10/18/99

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(See reverse for new important information)

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SERIAL NUMBER 09/404,940	FILING DATE 09/23/99	CLASS 345	GROUP ART UNIT 2775	ATTORNEY DOCKET NO. 1018.034US1			
APPLICANT KENTARO TOYAMA, REDMOND, WA.	<div>RECEIVED DEC 20 1999 TC 2100 MAIL ROOM</div> <b>**CONTINUING DOMESTIC DATA*****</b> VERIFIED  <b>**371 (NAT'L STAGE) DATA*****</b> VERIFIED          <b>**FOREIGN APPLICATIONS*****</b> VERIFIED          <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/18/99</b>						
Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>		STATE OR COUNTRY WA	SHEETS DRAWING 4	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 6		
ADDRESS MICHAEL A DRYJA LAW OFFICES OF MICHAEL DRYJA 704 228TH AVENUE NE PMB 694 REDMOND WA 98053							
TITLE COMPUTERIZED AESTHETIC JUDGMENT OF IMAGES							
FILING FEE RECEIVED \$1,156	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit				